2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000050393

1. Entity Name

PMF PROPERTIES, LLC



FILED Apr 25, 2008 08:00 AN Secretary of State

Principal Place of Business

7026 LITTLE ROAD NEW PORT RICHEY, FL 34654 Mailing Address

7026 LITTLE ROAD NEW PORT RICHEY, FL 34654



DO NOT WRITE IN THIS SPACE

04222008 No Chg-LLC CR2E083 (12/07)

4.	FEI Number		Applied For
	20-1417297		Not Applicable
5.	Certificate of Status Desired	.00 . e Regi	Additional

6. Name and Address of Current Registered Agent

MANUEL, PAUL A 7026 LITTLE ROAD NEW PORT RICHEY, FL 34654

CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

NEW POR	RI RICHEY, FL 34654	IN THIS SPACE		
	e named entity submits this statement for the purpose of changing its rations of registered agent	egistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept		
SIGNATURE.		Registered Agent signature required when reinstating) DATE		
	E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MANUEL, PAUL A 7026 LITTLE ROAD NEW PORT RICHEY, FL 34654	U00000921202		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		000000921802 05/15/08-80021-010 138.75		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS				

11. I hereby certify that the information exposite with his filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and has my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited hability company or the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE:

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/22/08

Daytime Prone #